



MUTUAL OF OMAHA INSURANCE COMPANY

V. J. SKUTT
CHAIRMAN OF THE BOARD
D. D. ULFERS
PRESIDENT

HOME OFFICE OMAHA, NEBRASKA

WASHINGTON, D.C., REGIONAL GROUP OFFICE
SUITE 1215, 1750 PENNSYLVANIA AVE., N.W.
WASHINGTON, D.C. 20006
298-8084

fwf
NORMAN C. CONWAY
MANAGER

September 8, 1967

PERSONAL & CONFIDENTIAL

STAT

Government Employees
Health Association
Post Office Box 463
Washington, D.C. 20044

G.E.H.A. Hospital
Indemnity Program

Dear [redacted]

STAT

I am enclosing two retention exhibits one based on a \$10 per day indemnity program and the other based on a \$20 per day indemnity program for employees only.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Norman C. Conway
Regional Manager

NCC:sak
Enc.

NAME G.E.H.A. HOSPITAL INDEMNITY PROGRAMRETENTION EXHIBIT

Health Total	Net Annual Premium	Incurred Claims	EE Lives	3,000	Administration:			Commission: 10 Yr. Level		
	\$48,600	\$34,020			IBM Cards	Self-Administration	Initial Certs		Self-Administration	Renewal Certs

Year	Net Annual Premium	Incurred Claims	Retention	Refund	Agent Commission	Taxes	Administrative Expense	Amortization of Acquisition	Risk Charge		
1	\$48,600	\$34,020	\$6,549	13.48%	\$8,031	16.52%	\$1,257	\$811	\$2,949	\$803	\$729
2	48,600	34,020	6,548	13.47	8,032	16.53	1,257	811	2,949	802	729
3	48,600	34,020	6,300	12.96	8,280	17.04	1,257	806	2,949	802	486
4	48,600	34,020	6,300	12.96	8,280	17.04	1,257	806	2,949	802	486
5	48,600	34,020	6,300	12.96	8,280	17.04	1,257	806	2,949	802	486
6	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
7	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
8	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
9	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
10	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
10 yr. Avg.	48,600	34,020	5,941	12.22	8,639	17.78	1,257	799	2,949	401	535

NAME G.E.H.A. HOSPITAL INDEMNITY PROGRAMRETENTION EXHIBIT

	Net Annual Premium	Incurred Claims	EE Lives	3,000	Administration:		Commission:
Health Total	<u>\$48,600</u>	<u>\$34,020</u>			IBM Cards	<u>Self-Administration</u>	10 Yr. Level
					Initial Certs	<u>Self-Administration</u>	
					Renewal Certs	<u>Self-Administration</u>	
					Benefits	<u>Self-Administration</u>	

Year	Net Annual Premium	Incurred Claims	Retention	Refund	Agent Commission	Taxes	Administrative Expense	Amortization of Acquisition	Risk Charge		
1	\$48,600	\$34,020	\$6,549	13.48%	\$8,031	16.52%	\$1,257	\$811	\$2,949	\$803	\$729
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4	48,600	34,020	6,300	12.96	8,280	17.04	1,257	806	2,949	802	486
5	48,600	34,020	6,300	12.96	8,280	17.04	1,257	806	2,949	802	486
6	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
7	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
8	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
9	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
10	48,600	34,020	5,482	11.28	9,098	18.72	1,257	790	2,949	-	486
10 yr. Avg.	48,600	34,020	5,941	12.22	8,639	17.78	1,257	799	2,949	401	535

NAME G.E.H.A. HOSPITAL INDEMNITY PROGRAMRETENTION EXHIBIT

Health Total	Net Annual Premium	Incurred Claims	EE Lives	Administration:	Commission:
	\$97,200	\$68,040	3,000	IBM Cards Initial Certs Renewal Certs Benefits	Self-Administration Self-Administration Self-Administration Self-Administration
	\$97,200	\$68,040			10 Yr. Level

Year	Net Annual Premium	Incurred Claims	Retention	Refund	Agent Commission	Taxes	Administrative Expense	Amortization of Acquisition	Risk Charge		
1	\$97,200	\$68,040	\$10,096	10.39%	\$19,064	19.61%	\$1,826	\$1,562	\$4,101	\$1,149	\$1,458
2	97,200	68,040	10,094	10.38	19,066	19.62	1,826	1,562	4,101	1,147	1,458
3	97,200	68,040	9,598	9.87	19,562	20.13	1,826	1,552	4,101	1,147	972
4	97,200	68,040	9,598	9.87	19,562	20.13	1,826	1,552	4,101	1,147	972
5	97,200	68,040	9,598	9.87	19,562	20.13	1,826	1,552	4,101	1,147	972
6	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
7	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
8	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
9	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
10	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
10 Yr.	Avg. 97,200	68,040	9,112	9.37	20,048	20.63	1,826	1,542	4,101	574	1,069

NAME G.E.H.A. HOSPITAL INDEMNITY PROGRAMRETENTION EXHIBIT

Health Total	Net Annual Premium	Incurred Claims	EE Lives	Administration:	Commission:
	\$97,200	\$68,040	3,000	IBM Cards	Self-Administration
	\$97,200	\$68,040		Initial Certs	Self-Administration
				Renewal Certs	Self-Administration
				Benefits	Self-Administration

10 Yr. Level

Year	Net Annual Premium	Incurred Claims	Retention	Refund	Agent Commission	Taxes	Administrative Expense	Amortization of Acquisition	Risk Charge		
1	\$97,200	\$68,040	\$10,096	10.39%	\$19,064	19.61%	\$1,826	\$1,562	\$4,101	\$1,149	\$1,458
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4	97,200	68,040	9,598	9.87	19,562	20.13	1,826	1,552	4,101	1,147	972
5	97,200	68,040	9,598	9.87	19,562	20.13	1,826	1,552	4,101	1,147	972
6	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
7	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
8	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
9	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
10	97,200	68,040	8,428	8.67	20,732	21.33	1,826	1,529	4,101	-	972
Avg.	97,200	68,040	9,112	9.37	20,048	20.63	1,826	1,542	4,101	574	1,069